FORTNIGHTLY LITERATURE REVIEW

REFERENCE	DESCRIPTION	ALERT SOURCE	KEYWORDS
GENERAL POLICY AND RESEARCH			
Mallett, S., Bentley, R., Baker, E., Mason, K., Keys, D., Kolar, V. and Krnjacki, L. 2011. *Precarious housing and health inequalities: what are the links? Summary report*. Australia: Hanover Welfare Service, University of Melbourne, University of Adelaide, Melbourne Citymission. http://www.vichealth.vic.gov.au/~/media/ResourceCentre/PublicationsandResources/Health%20Inequalities/Precarious%20Housing_Summary%20Report_web.ashx	This report describes the results of a study into the relationship between housing and health. The aim of the study was to determine whether poor health leads to precarious housing; and whether precarious housing (including unaffordability, unsuitability and insecurity of tenure) affects people's health. The results showed that: ▪ People in precarious housing generally had worse health than those who were not precariously housed; ▪ The poorer people's housing, the poorer their mental health; ▪ As health worsens, the likelihood of living in precarious housing increases; ▪ Poor health can lead to precarious housing; ▪ Multiple aspects of precarious housing (i.e. unaffordability, dwelling condition, overcrowding etc) affect health; and ▪ Certain groups are more susceptible to precarious housing, such as lone parents and singles, young people, older private renters, and children living with a lone parent. As well, education and employment were found to be strong predictors of precarious housing. The authors conclude that there is a need for integrated housing and health policy and services. The location of	City Futures	Housing; health; socio-economic status; neighbourhood design; mental health

	housing, particularly in relation to access to services, connection to social networks, and proximity to education and work, was identified as a critical factor in the housing/health relationship.		
No author given. 2011. *Emerging Crises Summit: Cities Population, Climate Change and Energy, Canberra, 6 July 2011. Communiqué*. Australia: Australasian Railway Association, Australian Conservation Foundation, ALGA, Bus Industry Confederation, Cycling Promotion Fund, National Heart Foundation of Australia, UTIP. http://www.heartfoundation.org.au/SiteCollectionDocuments/Key-Asks-Communique.pdf	This report describes the goals and policy recommendations determined at the Emerging Crises Summit, hosted by the Australasian Railway Association, the Australian Conservation Foundation, the Australian Local Government Association, the Bus Industry Confederation, the Cycling Promotion Fund, the Heart Foundation and the International Public Transport Association. The Summit was used as a policy forum to discuss carbon pollution, road congestion, population growth, physical inactivity and oil vulnerability. The stated goals are: ▪ To achieve a 10 per cent shift from cars to public transport, walking and cycling by 2020; ▪ Lower transport related emissions; ▪ Reduce road congestion; ▪ Reduce the use of fossil fuels in transport; and ▪ Increase physical activity rates in Australia, to lower obesity and improve public health. Some key policy recommendations include: ▪ Increased investment in public and active transport infrastructure; ▪ Road pricing reform; ▪ Development of a National Moving People Strategy which includes a dedicated Federal walking and cycling infrastructure scheme; ▪ Implementation of Healthy Spaces and Places guidelines at all levels of government and industry; ▪ Increased research into population growth and public and active transport, including cost-benefit analysis; and	APAN	Federal policy; public transport; physical activity; active transport; climate change; low carbon living

	▪ Upgrading of public transport fleets to low emissions technology, and increased incentives to use public transport.		
World Heart Federation. 2011. *Non-communicable diseases (NCDs): a global emergency*. Geneva: World Heart Federation. http://www.world-heart-federation.org/fileadmin/user_upload/children/documents/factsheets/Factsheet_Non_communicable_diseases.pdf	This fact sheet states that non-communicable diseases (NCDs) kill 36 million people a year – the most frequent cause of death in most countries, and accounting for almost two thirds of global deaths annually. The majority of people who have NCDs live in low- and middle-income countries, or disadvantaged regions of high-income countries. NCDs (which include cancer, cardiovascular disease, chronic respiratory disease and diabetes) are projected to increase to 44 million deaths per year if current trends continue. The four main risk factors for NCDs are stated as tobacco use, physical inactivity, harmful use of alcohol and unhealthy diet. Strategies to reduce or address these factors can be used to prevent deaths. The fact sheet provides a number of recommendations relating to prevention and treatment; cost-effective interventions; and development of collaborations between governments, international agencies, civil society and the private sector.	APAN	Non-communicable diseases; statistics; developing countries; socio-economic status
World Heart Federation. 2011. *Obesity: a growing danger*. Geneva: World Heart Federation. * http://www.world-heart-federation.org/fileadmin/user_upload/children/documents/factsheets/Factsheet_Obesity.pdf	This fact sheet states that globally, around 1.5 billion adults are classified as overweight, with 500 million of these adults classified as obese. In 2010, around 43 million children under the age of five were found to be overweight. Overweight and obesity are risk factors for NCDs, and approximately 3 million deaths per year are attributed to overweight/obesity. This is a particularly significant issue in developing countries – in 2010, more than two thirds of women were overweight or obese in South Africa. The fact sheet provides recommendations for how to address this issue, including improving walking and cycling infrastructure; improving physical education policies and healthy eating in schools;	APAN	Obesity; overweight; developing countries; socio-economic status; physical activity; healthy food options

	introducing restrictions for marketing of unhealthy foods; and improving the availability and affordability of fruit and vegetables. In addition, there is a need to alter policies and practices in trade, agriculture and transport, which have a role in shaping physical activity and dietary behaviours.		
Sinnett, D., Williams, K., Chatterjee, K. and Cavill, N. 2011. *Making the Case for Investment in the Walking Environment: A review of the evidence*. Bristol: University of the West of England and Cavill Associates. http://www.livingstreets.org.uk/index.php?cID=651	This report presents the arguments and evidence in favour of investing in walking environments, in the form of pedestrianisation schemes, public realm improvements, reallocation of public space, traffic calming measures, and other types of interventions, like behaviour change initiatives. The report outlines the various benefits of walking friendly environments; provides evidence on the types of interventions and characteristics of existing places that are successful in creating good walking environments; and describes ten case studies around the world.	APAN	Walking environments; physical activity; policy; interventions; neighbourhood design; case studies
Owen, N., Sugiyama, T., Eakin, E.G., Gardiner, P.A., Tremblay, M.S. and Sallis, J.F. 2011. "Adults' Sedentary Behaviour: Determinants and Interventions." *American Journal of Preventive Medicine* 41(2): 189-196. http://www.ajpmonline.org/article/S0749-3797(11)00322-9/abstract	This article looks at the factors influencing adults' sedentary behaviours, such as TV viewing and other screen time; prolonged sitting in the workplace; and time spent sitting in cars. The authors review the available evidence on the topic, and propose five research recommendations for understanding factors that influence this behaviour, as well as the development and evaluation of interventions. An ecologic model of sedentary behaviours is provided, which shows how multiple levels of influences (for example, social norms or environmental attributes) in specific settings affect particular behaviours.	APAN	Physical inactivity; sitting; workplace environment; transport
Healy, G.N., Clark, B.K., Winkler, E.A.H., Gardiner, P.A., Brown, W.J. and Matthews, C.E. 2011. "Measurement of Adults' Sedentary Time in Population-Based Studies." *American Journal of Preventive*	This paper provides a review of current methods used to measure adults' sedentary behaviour in population-based studies. Sedentary time can be measured in terms of specific behaviours (i.e. TV viewing, computer use); the amount of sedentary time occurring in a specific	APAN	Physical inactivity; sitting; measurement; self-report; accelerometer

Medicine 41(2): 216-227. http://www.ajpmonline.org/article/S0749-3797(11)00313-8/abstract	domain (i.e. work, leisure, domestic, transport); and overall sedentary time across a day. It can be measured using self-report (i.e. questionnaires, behavioural logs) or device-based measures (i.e. accelerometer). The paper provides a discussion of the reliability and validity of self-report methods, and recommendations for how to address this. The authors conclude that although there are some issues with reliability of self-report methods, they are able to capture important information about sedentary behaviour which may not be captured by device-based methods, and therefore both methods should be used together wherever possible.		
Bauman, A., Ainsworth, B.E., Sallis, J.F., Hagströmer, M., Craig, C.L., Bull, F.C., Pratt, M., Venugopal, K., Chau, J., Sjöström, M and the IPS Group. 2011. "The Descriptive Epidemiology of Sitting: A 20 Country Comparison Using the International Physical Activity Questionnaire (IPAQ)." *American Journal of Preventive Medicine* 41(2): 228-235. http://www.ajpmonline.org/article/S0749-3797(11)00300-X/abstract	This paper presents data from the International Prevalence Study, which explored high sitting time among adults aged 18-65 years from 20 countries. The median reported sitting time was 300 minutes per day, with adults in Taiwan, Norway, Hong Kong, Saudi Arabia and Japan reporting the highest sitting times. Adults in Australia reported a below average median sitting time of 240 minutes per day. Analysis of the data showed that adults aged 40-65 years were significantly less likely that those aged 18-39 years to report the highest sitting times. Also, post-school education was positively associated with higher sitting times.	APAN	Physical inactivity; sitting time; international; education; workplace
Gardiner, P.A., Eakin, E.G., Healy, G.N. and Owen, N. 2011. "Feasibility of Reducing Older Adults' Sedentary Time." *American Journal of Preventive Medicine* 41(2): 174-177. http://www.ajpmonline.org/article/S0749-3797(11)00266-2/abstract	This article describes a study of 59 adults aged 60 or above from Brisbane, which explored the feasibility of an intervention designed to reduce sedentary time for older adults. The intervention involved a face-to-face goal setting consultation, and provision of feedback from the monitoring of sedentary time. The results showed that sedentary time in older adults can be decreased through introducing an intervention based on goal setting and behavioural self-monitoring.	APAN	Physical inactivity; sitting; intervention; elderly; behavioural change

GETTING PEOPLE ACTIVE			
Rojas-Rueda, D., de Nazelle, A., Tainio, M. and Nieuwenhiujsen, M.J. 2011. "The health risks and benefits of cycling in urban environments compared with car use: health impact assessment study." *British Medical Journal* 343. http://www.bmj.com/content/343/bmj.d4521.full.pdf	The aim of this health impact assessment study was to estimate the risks and benefits to health of cycling for transport, in comparison to car use. The setting for the study was a public bicycle sharing program in Barcelona. The authors provided an estimate of the annual change in mortality (attributable to physical activity, road traffic accidents, and exposure to air pollution). The results showed that an estimated 12.46 deaths were avoided each year due to use of the bicycle share program. In addition, carbon dioxide emissions were reduced. The article describes how this health impact model can be used to assess the risks and benefits of active transport policies in other cities.		Physical activity; cycling; cycling; infrastructure; health impact assessment; risk benefit model; policy
World Heart Federation. 2011. *Physical activity: vital to global health*. Geneva: World Heart Federation. http://www.world-heart-federation.org/fileadmin/user_upload/children/documents/factsheets/Factsheet_Physical_activity.pdf	This fact sheet states that physical inactivity contributes to around 3.2 million deaths per year, globally. 2.6 million of these deaths are in low- and middle-income countries. Physical inactivity is the fourth highest risk factor for mortality, linked to heart disease, diabetes and cancer. The World Heart Federation reports that over 30 per cent of adults do not engage in an adequate level of physical activity. The fact sheet provides a number of recommendations in relation to walking, cycling and public transport strategies; physical education for children; use of social marketing programs to promote physical activity; and development of national action plans.	APAN	Physical inactivity; sitting; statistics; sedentary behaviour; workplace; developing countries
Tait, P.W. 2011. "Active Transport and Heat." *Asia-Pacific Journal of Public Health* 23(4): 634-635. http://aph.sagepub.com/content/23/4/634.full.pdf+html	This letter to the editor addresses recent literature which describes the co-benefits for health and the environment to be gained from the adoption of active transport policies. The author highlights climate science research which states that projected increases in temperature will limit the amount of time people are able to spend outdoors, and the intensity of physical	APAN	Climate change; co-benefits; physical activity; active transport; heat

	activity undertaken, due to an increased risk of heat stress. This will impact on the ability of people to engage in physical activity, and undermine active transport policies. The author believes that this needs to be taken into account, and that co-benefits cannot be automatically assumed but need to be carefully designed in.		
Salmon, J., Tremblay, M.S., Marshall, S.J. and Hume, C. 2011. "Health Risks, Correlates, and Interventions to Reduce Sedentary Behaviour in Young People." *American Journal of Preventive Medicine* 41(2): 197-206. http://www.ajpmonline.org/article/S0749-3797(11)00298-4/abstract	This paper provides a review of literature relating to sedentary behaviours among young people aged 2-18 years. The evidence collected shows that young people spend 2-4 hours per day in screen-based behaviours and 5-10 hours per day engaging in sedentary behaviours. Ethnicity, socio-demographic status, parental behaviour, and having a TV in the bedroom have been identified as key factors in TV viewing time. The authors state that there has been limited success in recent studies which aim to reduce TV viewing and sedentary behaviours, and recommend that more research be undertaken to further explore the determinants of sedentary behaviours.	APAN	Physical inactivity; sitting; sedentary behaviour; young people; interventions; review
Van Domelen, D.R., Koster, A., Caserotti, P., Brychta, R.J., Chen, K.Y., McClain, J.J., Troiano, R.P., Berrigan, D. and Harris, T.B. 2011. "Employment and Physical Activity in the U.S." *American Journal of Preventive Medicine* 41(2): 136-145. http://download.journals.elsevierhealth.com/pdfs/journals/0749-3797/PIIS0749379711002625.pdf	This article explores the relationship between employment status (i.e. full-time, part-time, or not employed), job type (active or sedentary) and daily physical activity levels. The study involved the monitoring of 1826 American adults aged 20-60 years for 4 or more days, using accelerometers. The results showed that in men, full-time workers were more active than non-workers, even when the full-time worker had a sedentary job type. By contrast, women with full-time sedentary jobs were less active than non-workers on weekdays.	APAN	Physical inactivity; sitting; sedentary behaviours; employment
McDonald, N.C., Brown, A.L., Merchetti, L.M. and Pedroso, M.S. 2011. "U.S. School Travel, 2009: An Assessment of Trends." *American*	This article provides an analysis of the US National Household Travel Survey, which collected data on the travel patterns of 150,147 households in 2008 and	APAN	Physical activity; active transport; children; school;

Journal of Preventive Medicine 41(2): 146-151. http://www.ajpmonline.org/article/S0749-3797(11)00263-7/abstract	2009. The results showed that in 2009, 12.7% of students (from kindergarten to year 8) walked or cycled to school, in comparison with 47.7% in 1969.		walking; cycling
Pearson, N. and Biddle, S.J.H. 2011. "Sedentary Behaviour and Dietary Intake in Children, Adolescents, and Adults: A Systematic Review." *American Journal of Preventive Medicine* 41(2): 178-188. * http://www.ajpmonline.org/article/S0749-3797(11)00299-6/abstract	This article explores the relationship between dietary intake and sedentary behaviour in young people and adults. The authors undertook a systematic review of the literature, looking in detail at 53 studies. The results showed that sedentary behaviour is associated with elements of a less healthy diet, including lower fruit and vegetable intake, and higher consumption of energy-dense snacks, drinks and fast foods. The authors recommend that interventions which aim to reduce sedentary time be developed, in order to test whether this also has an impact on dietary intake.	APAN	Physical inactivity; sedentary behaviours; dietary intake; systematic review
CONNECTING AND STRENGTHENING COMMUNITIES			
Benevolent Society. 2011. *Social capital among school students in disadvantaged communities: Research Snapshot, July 2011*. Sydney: Benevolent Society. http://www.bensoc.org.au/uploads/documents/Social_capital_among_school_students_Res_Snapshot_July_2011.pdf	This paper describes a study undertaken in schools in two disadvantaged communities in NSW. The aim of the project was to develop a multi-dimensional measure of social capital, as well as to explore the relationship between social capital and the health and wellbeing of young people. The results showed that students with higher levels of social capital tended to demonstrate better mental and physical health, academic self-concept, sense of belonging in the school and community, and lower levels of perceived discrimination.	City Futures	Social capital; young people; school; low socio-economic status; social interaction
PROVIDING HEALTHY FOOD OPTIONS			
World Heart Federation. 2011. *Global dietary changes threaten health*. Geneva: World Heart Federation. http://www.world-heart-federation.org/fileadmin/user_upload/children/documents/factsheets/Factsheet_Unh	This fact sheet states that inadequate consumption of fruit and vegetables leads to an increased risk of cardiovascular disease and some types of cancer, and causes around 1.7 million deaths per year. In addition high consumption of salt and saturated and trans-fats is associated with high blood pressure and heart disease.	APAN	Obesity; overweight; heart disease; healthy food options

ealthy_diet.pdf	There is a significant relationship between unhealthy diets and high blood pressure, high blood glucose, overweight and obesity, and high cholesterol. The fact sheet provides recommendations in relation to promotion of fruit and vegetable consumption; trade and agricultural policies; institutional changes; marketing and advertising; and provision of food in schools, workplaces and communities.		
Pearson, N. and Biddle, S.J.H. 2011. "Sedentary Behaviour and Dietary Intake in Children, Adolescents, and Adults: A Systematic Review." *American Journal of Preventive Medicine* 41(2): 178-188. * http://www.ajpmonline.org/article/S0749-3797(11)00299-6/abstract	This article explores the relationship between dietary intake and sedentary behaviour in young people and adults. The authors undertook a systematic review of the literature, looking in detail at 53 studies. The results showed that sedentary behaviour is associated with elements of a less healthy diet, including lower fruit and vegetable intake, and higher consumption of energy-dense snacks, drinks and fast foods. The authors recommend that interventions which aim to reduce sedentary time be developed, in order to test whether this also has an impact on dietary intake.	APAN	Physical inactivity; sedentary behaviours; dietary intake; systematic review
World Heart Federation. 2011. *Obesity: a growing danger*. Geneva: World Heart Federation. * http://www.world-heart-federation.org/fileadmin/user_upload/children/documents/factsheets/Factsheet_Obesity.pdf	This fact sheet states that globally, around 1.5 billion adults are classified as overweight, with 500 million of these adults classified as obese. In 2010, around 43 million children under the age of five were found to be overweight. Overweight and obesity are risk factors for NCDs, and approximately 3 million deaths per year are attributed to overweight/obesity. This is a particularly significant issue in developing countries – in 2010, more than two thirds of women were overweight or obese in South Africa. The fact sheet provides recommendations for how to address this issue, including improving walking and cycling infrastructure; improving physical education policies and healthy eating in schools; introducing restrictions for marketing of unhealthy foods; and improving the availability and affordability of	APAN	Obesity; overweight; developing countries; socio-economic status; physical activity; healthy food options

	fruit and vegetables. In addition, there is a need to alter policies and practices in trade, agriculture and transport, which have a role in shaping physical activity and dietary behaviours.		

***** denotes an item which has been placed in a number of different categories